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ABSTRACT

Distinctions between males and females arise as a result of a complex developmental process involving biological, psychological, and sociological forces. Much research on male gender identity development has spurred from the increased interest in the etiology of homosexuality over the last two decades. Political, religious, and moral issues often fuel the interest in certain kinds of research, and the same is true in the research on male gender identity development because of the relationship between gender identity and sexual orientation. Biological forces have been cited as the major impetus for homosexuality as well as many other personality constructs by popular science and the media. As a result, the sociological and environmental forces, as well as individual psychological differences, tend to be overlooked. A gestalt approach is needed. The body of literature supports a bio-psycho-social interaction, which seems to appropriately demonstrate the complex nature of gender identity and its development. Finally, one could suggest that a spiritual aspect be included in the concept of gender; the differences between men and women should be celebrated. (Contains 65 references.) (EMK)

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ACHIEVING MASCULINITY: A REVIEW OF THE LITERATURE ON MALE GENDER IDENTITY DEVELOPMENT

A Doctoral Research Paper

Presented to

the Faculty of the Rosemead School of Psychology

Biola University

In Partial Fulfillment

of the Requirements for the Degree

Doctor of Psychology

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by

Daniel W. Puls

May, 1998

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ACHIEVING MASCULINITY: A REVIEW OF
THE LITERATURE ON MALE GENDER
IDENTITY DEVELOPMENT

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Distinctions between males and females arise as a result of a complex developmental process involving biological, psychological and sociological forces. Much research on male gender identity development has spurred from the increased interest in the etiology of homosexuality over the last two decades. Political, religious and moral issues often fuel the interest in certain kinds of research and the same is true in the research on male gender identity development because of the relationship between gender identity and sexual orientation. Biological forces have been cited as the major impetus for homosexuality as well as many other personality constructs by popular science and the media. As a result, the sociological and environmental forces, as well as individual psychological differences, tend to be overlooked. The body of literature supports a bio-psycho-social interaction, which seems to appropriately demonstrate the complex nature of gender identity and its development.

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ACHIEVING MASCULINITY: A REVIEW OF THE LITERATURE ON MALE GENDER IDENTITY DEVELOPMENT

Introduction

"So God created man in His own image, in the image of God He created him: male and female he created them." Genesis 1: 27.

Popular interest in gender differences is on the rise. Where gender differences have been downplayed in the light of women's fight for equality, the pendulum is swinging back to the realization and acceptance that there can be equality as well as differences. As our society and culture emerges and changes, there is an increasing valuing of and appreciation for the complementary nature of the ways that men and women can work together in a greater variety of roles. There is great potential for improvement in work and relationships as people incorporate both masculine and feminine perspectives, skills, and thinking. In contrast to these changes, there are also many who continue to discount the differences, attempting to homogenize or even neutralize gender contrast. To the extent that gender distinctions are de-emphasized in a society, there are likely to be implications for people, especially children, as they develop in the area of self-identity, particularly as it pertains to being male or female. Concepts of masculinity and femininity are not merely concepts that describe societal roles. In regard to personality, gender is a core construct in the concept of one's self.

The propelling question regarding the impact of nature or nurture on development is not new to psychological research. Freud believed in a strong relationship between biological and psychological processes as the primary basis for gender identity (as well as many other psychological phenomenon). However, at the time of his writing and analytic research, relatively little was understood regarding biological effects including genetic and hormonal factors. Stoller (1984), a predominant contributor to significant works on gender, writes that core gender identity is derived from three sources: the anatomy and physiology of the genitalia; the attitudes of parents, siblings and peers toward the child's gender role; and the biological force that can more or less modify the attitudinal (environmental) forces.

The question regarding the degree of impact each of these forces may have is certainly evident within the body of research on gender identity development. Looking at the empirical research specific to male gender identity, what factors are shown to contribute to the achieving of a masculine identity? Is the engendering of a personal sense of masculinity within a male a task that is achieved primarily as a result of external factors, or passively acquired as biological forces create an inevitable outcome? To what degree might multiple factors seem to work together? Regardless of the impetus, like all aspects of personality, gender identity emerges over a developmental course toward maturity.

Questions arise as to what constitutes the nature of gender and the contrasts between male and female. What makes a boy particularly masculine? What is involved in the process? Biological differences alone begin to speak the truth of the wonderful and necessary contrasts between the sexes. Yet there is more to gender distinction than mere physiological and hormonal differences.

One's ability to experience identity as a man or as a woman also involves more than simple identification and cognitive acceptance of biological distinctions. What seems to be the qualities and characteristics which distinguishes one from being masculine in contrast to being feminine? What is the process by which one embraces such characteristics to form personal identities as male or female; as boy or girl; as man or woman? To understand the contrast of male and female beyond biology, one must begin to look at other human characteristics which seem to display differences in gender.

In as much as gender consists of more than physiological and anatomical differences, so the concept of gender identity must extend to the place of how one experiences aspects of the self at an internal or core level (Stoller 1968). Gender identity involves physical attributes, an internal perception, external validation, and behavioral manifestation all according to gender stereotypes. The focus of this paper is to look specifically at external factors involved in the process of male gender identity development. Biological considerations will be acknowledged and cursorily explained, however the body of literature is too extensive to include in the scope of this presentation.

The questions pertaining to the engendering process are very pertinent today. A small surge in popular interest occurred during the process of writing this paper. An article appeared in Time Magazine titled "A Boy without a Penis" (Gorman, 1997). It was about a man who, having been the victim of a botched circumcision, was then surgically altered, given hormones and psychiatric treatments and raised as a girl. In spite of these intervention efforts, the child grew up with a great deal of confusion regarding "her" gender identity. Subsequently this person grew up and chose to be reassigned back to being a male and now, in his early thirties, is living as such today. What happened?

Does this single case study speak to how one becomes masculine or feminine? Does this support genetic predisposition? Where the hormones ineffective?

Pertinent to the issue of the study of gender identity is its consequential relationship to the development of sexual identity and sexual orientation. A strong tie exists between the research on gender identity development and later sexual orientation (Green, 1985; Coates & Wolf, 1995) Popular media has portrayed an increasingly open homosexual community, expressing the hope for, and the expectation of, social acceptance as well as protection under the law as a minority group. To more fully achieve these goals, it would be advantageous to scientifically establish a basis for biological or genetic determinants. Yet, in contrast to the major emphasis on the search for biological factors affecting gender and sexual orientation, increasing the popular notion that homosexuality is genetically predetermined, the overall body of literature still speaks to a variety of developmental factors.

What this does allude to is that gender identity is deeply imbedded within our self experience as human beings–as men and as women. Gender identity is not a concept simply limited to sexuality. It has to do with roles we play, self perception and acceptance, and the variety of ways in which we are able to relate with others. This paper is written with the assertion of belief and assumption that sexuality and gender contrasts in humans are expressions of God's image. Within a Judeo-Christian theological perspective, gender is a foundational concept. This perspective holds that God designed gender differences to metaphorically illustrate the nature of God–complementarity and diversity in union. While an apologetic of how God's image is displayed in the union of male and female is not the focus of this paper, it is another impetus to speak of the importance of gender differences.

Where God intentionally created complementary distinctions between men and women, it seems that many of these differences are lost when a non-gendered, neuter state becomes the norm, and gender differences and roles become undefined, obscured or ridiculed. Making observations of creation through structured, methodological approaches helps bring clarity, understanding and objectivity to the concept of male gender identity development. The attempts at this will now be examined.

Methodological Considerations

As the recent literature on gender identity development is reviewed, a critique of methodology must be included. A proper understanding of the results of empirical research necessitates a critical evaluation of the methods. The body of writing on gender is extensive and touches upon a diversity of topics such as gender roles, gender differences, sexuality, etc. Looking specifically at gender identity, the body of writing is largely theoretical, based primarily upon psychoanalytic perspective and clinical case study. Freud himself wrote a great deal about gender identity, establishing a strong theoretical base which is still prevalent today (Stoller 1985). In comparison, the number of empirical studies which focus on extrinsic factors involved in gender development is rather small.

The topic of male gender identity development overlaps the research in areas such as human sexuality, gender differences, sex roles, homosexuality, transsexuality and transvestitism. As such, this body of research is not left untainted by certain bias and political agenda. While there are always going to be personal or corporate, political or social interests that spur the motivation to do research, few issues enter the arena of social and human rights debate as

much as issues pertaining to gender, sexual orientation and non-conforming sexual behavior. How can the motivations behind certain research be separated out? Not readily. Regardless of the motives behind the research, the results need to be examined objectively. As well, demand characteristics which may be influential in research must be acknowledged as they become evident.

Definitions

In order to discuss the development of male gender identity there must first be an understanding and a clarification of some of the terms most commonly found in the research and literature. Review is made difficult as different terms have the same meaning and sometimes the same terms have different meanings. Attempting to describe psychological constructs such as personal identity and core pieces of the human soul is a significant challenge in doing scientific research. Describing demarcations of gender such as masculinity, femininity and androgyny becomes difficult as definitions are not at all universal. Without a single, specified set of standard terminology within this body of literature, one needs to develop an intuitive understanding of the common ideas after reading a good portion thereof.

Stoller (1984), known for his early works on gender identity, has contributed a great deal to establishing terminology and definitions. He defines masculinity or femininity as any quality that is felt by its possessor to be masculine or feminine. He further describes the concept of core gender identity as one's personal conviction that he or she physiologically and, ultimately, psychologically fits the gender he or she is assigned or named. More specifically, for a male to experience a masculine gender identity he would need to have the inner sense (an affective or emotional confirmation that he is male) and have the corresponding anatomical and physiological traits which he would

know or experience to be masculine. In order to study this subjective concept it must be broken up into measurable, more objective parts. Defining any variable of human personality has its challenges, therefore, many concepts must be described using aspects of observable behavior or appearance.

Various researchers have contributed positively to sharpening the definitions commonly found. Being male is most commonly a reference to the biological sex-type (XY genotype), and having male genitalia. The term "masculine" is used as a descriptor of behaviors, attitudes and personality traits that a society, in a given culture and time, typically attributes to males (Zucker, Bradley, & Sullivan, 1992). Such traits that are typically identified as masculine include assertiveness, instrumentality, adventuresome activities, business and mechanical interests (Kagel & Schilling, 1985), dominance and self-assertion (Mitchell, Baker, & Jacklin, 1989), strength, confidence, outgoing, energetic, and risk-taking (Kronsberg, Schmaling, & Fagot, 1985; Nicolosi, 1991). Masculine behaviors and activities include rough-and-tumble play, athletics and contact sports, childhood interest in toy vehicles (trucks, cars, and airplanes), machines, tools, building pieces and weapons, and imagination games such as war, cowboys and Indians and adventure themes (Bates & Bentler, 1973; Fagot, Leinbach, & Hagan, 1986; Phillips & Over, 1992; Roopnarine, 1986; Weintraub, Clemens, Sockloff, Ethridge, Gracely & Myers,1984.) This is only a cursory list of masculine traits discussed in the body of literature that is pertinent to understanding masculine identity development in western culture.

In contrast, qualities typically identified as feminine include traits of nurturance and interpersonal warmth (Mitchell, Baker, & Jacklin, 1989), responsibility, interest in domestic and child care chores (Lytton & Romney, 1991), and an ability to be sensitive, empathetic, expressive, caring and

emotionally responsive (Campbell, 1989). Activities are often associated with doll play, dress-up, dance and drama, role-playing in domestic activities (doll house play) and cooking using toy kitchen sets (Bates & Bentler, 1973; Idle, Wood, & Desmarais, 1993; Langlois & Downs, 1980). Girls' games and patterns of physical interaction focus less on physical contact and competition and tend to be more incorporative, cooperative, verbal and associative than boys' (Fagot, Leinbach, & Hagan, 1986.) Within western culture and, to a great extent, universally, these attributes are characteristic of the female gender or sex, as defined by persons having female genitalia and an XX genotype.

Men and women, as well as boys and girls, operate in contrasting roles within culture. The early term, "sex role," originally referred specifically to the male or female role within sexual intercourse. Because of its lack of breadth, however, a new term, "gender role," was developed to describe other general behaviors, mannerisms and demeanor (Money, 1994). In spite of good attempts by Money and others to establish clarity and uniformity within the body of literature, terminology still tends to overlap. The terms "sex role" and "gender role" are now often used interchangeably. Gender or sex roles refer to the ways that people behave and interact within society, manifested in word and deed, which may be masculine or feminine as stereo-typically accepted or defined by culture. Gender role generally emphasizes the outward display of one's sense of masculinity or femininity.

The entity of a boy or man's experience as a male is a bio-psycho-social interrelationship of being physiologically male, having an inner sense that he is male, and having outward expressions, behaviors and mannerisms which are sociologically and culturally affirmed as being appropriately masculine. Having a secure masculine gender identity would require that all three of these basic

components be relatively firmly intact. However, much research is initiated by questions about when things go wrong, or at least apparently different. Terms such as "gender non-conformity," "gender disorder," "gender dysphoria," "gender confusion" and "cross-gender" all come from aspects of gender which are out of the norm.

On rare occasions, children are produced which are physiologically and/or genotypically anomalous to gender categories. Congenital disorders (for more detailed descriptions see Stoller, 1985, pp.22-23) and forms of hermaphroditism, become major setbacks to normal gender development from the start, often affecting the sex assignment and the physical appearance of children which usually affect them in various ways throughout life. In physiologically normal males, other problems can become evident later in development. Gender non-conforming, gender confused, gender dysphoric and gender disordered are terms describing a child whose behavior is opposite, non-stereotypical or cross-gender to his or her assigned sex. These terms generally speak to problems in the area of gender roles yet they also overlap in the areas of core gender identity. Transsexualism, and to some degree, transvestitism, are often manifested among people who struggle with severe conflict over their assigned sex and their inner sense of being male or female.

Gender Identity Disorder. Even though gender anomalies have been evident in societies throughout history, clinical descriptions and diagnosis thereof began just over 160 years ago (Pauly, 1992). Gender Identity Disorder (GID) is the most common, standard and clearly defined term found in the research literature on gender identity development as described by the Diagnostic and Statistical Manual of Mental Disorders, (DSM; American Psychiatric Association, 1994). The current description is as follows:

A. A strong persistent cross-gender identification. In children, the disturbance is manifested by four (or more) of the following:

(1) repeatedly stated desire to be, or insistence that he or she is the other sex

(2) in boys, preference for cross-dressing or simulating female attire; in girls, insistence on wearing only stereotypical masculine clothing

(3) strong persistent preferences for cross-sex roles in make-believe play or persistent fantasies of being the other sex

(4) intense desire to participate in the stereotypical games and pastimes of the other sex

(5) strong preference for playmates of the other sex

In adolescents and adults, the disturbance is manifested by symptoms such as a stated desire to be the other sex, frequent passing as the other sex, desire to live or be treated as the other sex, or the conviction that he or she has the typical feelings and reactions of the other sex.

B. Persistent discomfort with his or her sex or sense of inappropriateness in the gender role of that sex. (see manual for further description)

C. The disturbance is not concurrent with a physical inter-sex condition. (other specifications for GID are provided in such cases)

D. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (pp. 537-538).

That only one such standard definition of gender disturbance is being used at this point demonstrates the difficulties in exploring and comparing the body of empirical research presently available. GID defines pathology which is descriptive of an extreme and very rare disturbance. When attempting to provide descriptors for how a boy or man comes to have a sense of identification

as a masculine being, little is spoken of in terms of degrees of growth, change, development or pathology. Clear descriptions for concepts regarding one's inner sense of gender such as insecure, deficient, dysphoric, effeminate and unmasculine are not effectively and universally defined. Such are internal, subjective experiences which may not strongly manifest in visible ways. Friedman (1988) notes that using the GID Not Otherwise Specified category provides a way to assess and describe patterns that may be less extreme.

Gender identity and sexuality. Gender identity and sexual behavior are strongly related within the research. Terms such as sexual identity, sex-role identity, sex-role preference, sexual preference and sexual orientation generally pertain to the expression of sex object preference, i.e. heterosexual, homosexual, and bisexual. Again, because of the lack of universally agreed upon terms, readers of the research must be aware of the definitions. For example, Kagel and Schilling (1985) use the term "sexual identification" to describe a covert or unconscious wish to be like one sex or the other. Such a definition for this term is not found elsewhere in the literature, which may not only be confusing, but also potentially weakens the possibility of comparing the findings with other research using the same term.

Instruments

Attempts to examine defined aspects of gender identity and related gender topics varies widely. The subjective nature of one's inner sense of gender identity, the lack of universally accepted terminology and the cultural differences and changes that determine stereotypes of gender behavior and interest all make the development of instruments for research difficult. Presently, a wide variety of means of measuring variables is found throughout the body of research. Comparing results across a body of literature is made

difficult when there is little consistency in instruments used and when a wide range of measuring tools is employed by researchers.

Standardized measures for gender identity research are few and some are in the early stages of development. Developed in 1974, the Bem Sex Role Inventory (BSRI) is a self-report inventory used to measure behaviors and self perceptions, and categorically assigns the subject as predominately masculine, feminine, androgynous or undifferentiated (Bem, 1974). A femininity minus masculinity difference score provided information for group comparisons on a dimension reflecting stereotyped femininity at the positive pole and stereotyped masculinity at the negative pole (Kagel & Schilling, 1985).

The Boyhood Gender Conformity Scale (BGCS) was developed in 1987 in an attempt to obtain a reliable, valid and potent discriminating instrument for accurately classifying adult male respondents for sexual orientation based upon their reported boyhood gender conformity or nonconforming behavior and identity (Hockenberry & Billingham, 1987). It is a 20-item scale which ranks gender conformity on a score between zero (extremely effeminate) and 120 (extremely masculine). The BGCS found a 5-item and a 13-item function which discriminated homosexual men from heterosexual men with fairly high accuracy ($\underline{r} = .87$). The validity is dependent upon accurate recall of early experiences which can be a weak point. Such a scale, however, may prove to be a useful and productive point of departure for future investigations that attempt to clarify and define the nature of the relationship between boyhood gender conformity and later sexual orientation.

Related to the research on gender identity and later sexual orientation, some studies have used the popular Kinsey Heterosexual-Homosexual Scale (Kinsey, Pomeroy, & Martin, 1948) in establishing samples of homosexual and

heterosexual men (Bailey, Willerman, & Parks, 1991; Hockenberry & Billingham, 1987), or to determine the degree or extent of homosexual or heterosexual orientation (Green, 1985). The Kinsey Scale is a widely used instrument which rates sexual orientation on a seven point continuum from zero (exclusively heterosexual) to six (exclusively homosexual). The scale measures orientation primarily as it is manifested in the individual by sexual behaviors and conscious attraction.

Some criticisms of the Kinsey Scale have emerged in recent years. Because the nature of sexual orientation is very complex, the Kinsey Scale is found to be limited, tending to dichotomize human sexuality. As a result, Klein (1981) developed a variation of Kinsey's instrument which provides a better view of the complex scope of human sexual orientation. More extensive use of an instrument such as the Klein Sexual Orientation Grid (KSOG) may serve to better measure sexual orientation, providing a richer picture of the complex aspects of homosexuality and gender identity.

Gender sorting tasks were performed in two studies (Fagot, Leinbach, & Hagan, 1988; Weinraub et al., 1984) which effectively served to determine a child's ability to discern between stereotypical attributes and roles of masculinity and femininity. Sorting tasks and inventories have also been implemented by other studies (Brenes, Eisenberg, & Helmstadter, 1985; Emihovich, Gaier, & Cronin, 1984; Idle, Wood, & Desmarais, 1993; Weinraub, et al., 1984) which have been helpful in establishing or validating the placement of toys, objects, pictures, role behaviors, tasks, etc. into stereotypical masculine and feminine categories. The information from such tasks or inventories has then been used for other operations within a particular research project, or it has been evaluated for its own descriptive merit.

Toy play preference studies attempt to measure aspects of gender identity by methodically observing children at play using gender stereotyped toys. This is based upon the assumption that behaviors exhibit internal functioning. Several studies (Brenes, Eisenberg, & Helmstadter, 1985; Langlois & Downs, 1980; Roopnarine, 1986; Weinraub, et al., 1984) have carefully developed ways to measure or codify children's gender concepts as children were observed interacting with the different sets of toys. Bates and Bentler (1973) developed a games inventory for parents to fill out in order to study the differing play activities of normal and effeminate boys. Such an instrument seems to have been effective in the attempt to simplify what otherwise would have taken many hours of observation, rating and scoring.

Many of the studies involved the development of interviews and inventories that were specific to the research question. Some of these are given formal names yet they are not otherwise published or standardized. Structured interviews and behavioral observation, being rich in clinical information, have been used by researchers when the information has been transformed into measurable variables. The painstaking process of codification of taped clinical interview and/or video observation was the common procedure found in numerous studies (Brenes, Eisenberg, & Helmstadter, 1985; Fagot, Leinbach, & Hagan, 1986; Green, Williams, & Goodman, 1985; Idle, Wood, & Desmarais, 1993; Kronsberg, Schmaling, & Fagot, 1985; Langlois & Downs, 1980; Marantz & Coates, 1991; Zucker, et al., 1994).

Sophistication and standardization of the instruments used in research will increase as the base of knowledge grows larger and as others seek to replicate studies. Effective measuring instruments, found to be valid and reliable, will become more commonly used and seen in the literature as time

goes on and the interest in gender identity studies continues.

Samples

Normal or healthy gender identity development has not been a well researched topic to date. More often than not, it is pathology or some anomaly which draws attention for research. Specifically, in studying the issue of male gender identity, the research is most often focused on boys who do not fit the stereotypically masculine norm. When healthy aspects are focused upon, pathology is still used as a means of comparison. In studying male gender identity development, the body of empirical literature has primarily focused on the study of effeminate boys. Boys who are diagnosed as, or exhibit numerous criteria for GID are typically the population of focus. Retrospective studies, usually based upon data from subjects' recollections of past experience, have focused upon adult populations of male homosexuals, transvestites and transsexuals (Bailey, Willerman, & Parks, 1991; Phillips & Over, 1992; Roberts, Green, Williams, & Goodman, 1987; Schott, 1995; Thompson, Schwartz, McCandless, & Edwards, 1973)

The validity of research in this case is only as valid as its assumptions made regarding the populations and consequently the samples used. Is it valid to assume that homosexuals, transvestites and transsexuals can provide information regarding factors involved in the development of gender identity? Many would logically assume so, however the issue is controversial. Issues involved in sampling become critical here because of the question of whether or not homosexual men should be studied for research on gender identity. Do aspects of sexual identity and gender identity overlap significantly to the extent that would legitimize the assumption that similar etiological factors are involved? Some would argue that not all adult homosexual men are gender

disturbed, nor were they as children. Likewise, not all gender disturbed children grow up to be homosexual.

Coates and Wolfe (1995) write that a significant minority of adult homosexuals recall experiencing cross-gender interests to the extent of meeting the clinical criteria for GID. They suggest an upper level estimate of 15% of adult male homosexuals experienced GID but anticipate it is probably much lower than that. This concurs with the fact that the rate of GID within the general population of boys (exact estimates unknown) is much rarer than the estimates of adult male homosexuals in the genderal population–even using present upper level estimates of two to four percent (Reisman & Eichel, 1990). This is also in agreement with Friedman (1988), who writes that extreme boyhood femininity is hypothesized to occur in only a relatively small percentage of the larger group of gender-disturbed children who become homosexual adults. In contrast, Coates and Wolfe also site that retrospective studies of clinically unreferred homosexual men reveal that about three-fourths have described themselves as gender-nonconforming. In summary, while few adult homosexuals met the criteria for GID as children, most experienced some degree of cross-gender behavior or gender dysphoria.

While Zucker et al. (1992) state that GID in childhood and postpubertal homoeroticsism may not necessarily be concurrent developmental phases of the adult homosexual condition, they recognize that the populations are not mutually exclusive either. In a prospective study, Green (1985) demonstrated that out of a sample of 66 boys with GID, as many as 80% of them grew up to be later involved in homosexual behavior. Zucker and Green (1992) write that current research has produced estimates that 66% to 75% of boys referred for problems relating to gender issues grow up to be homosexual. Bailey and

Zucker (1995) conclude a quantitative review of research on childhood sex-typed behavior and later sexual orientation with the statement that homosexual individuals recall substantially more childhood cross-sex-typed behavior than do heterosexuals. These observations support the basic notion of Nicolosi (1991) who believes that male homosexuality is closely tied to unresolved conflicts and developmental delays in gender identity.

Whether the population is termed as GID, gender-disturbed, gender non-conforming or something similar, the above research supports that such gender related issues in boyhood and later homosexual orientation have a high correlation. One of the areas for future research in this area is determining the extent of gender non-conformity and the relationship to later homosexual orientation. While further research is needed to clarify and support the nature of the relationship, already the findings up to this point suggest the importance of recognizing the research on homosexuality and homosexual development in conjunction with the research on gender identity. With this now in mind, the specifics of sampling can be examined.

When studies have been done on effeminate boys, samples have most often been comprised of clinical or professional referrals (Bates & Bentler, 1973; Blanchard, Zucker, Bradley, & Hume, 1995; Davenport, 1986; Green, 1985; Marantz & Coates, 1991; Rekers & Swihart, 1989; Roberts, Green, Williams, & Goodman, 1987; Zucker, Bradley, & Sullivan, 1996; Zucker, et al., 1994; and Zucker, Wild, Bradley, & Lowry, 1993.) Due to practicality, it is necessary to have clinical referral because random sampling from the general population could not produce a large enough group of profoundly gender disturbed boys to make any detectable difference in statistical results. Where samples of normal boys have been used in comparison, they have been usually

selected from the general population in a systematic way to match the study group.

Adult samples of homosexual, transvestite and transsexual men have been selected for studies using retrospective material. Men who, as a population, generally have had problems with their gender identity, have been asked to recall information which was then used as data for research (Bailey, Willerman, & Parks, 1991; Kagel & Schilling, 1985; Phillips & Over, 1992; Schott, 1995; Thompson, Schwartz, McCandless, & Edwards, 1973; Zucker, et al., 1994.) Samples are often gathered through recruitment in gay and alternative newspapers and media, college and university classes or homosexual organizations, and networks of personal association. This weakens the ability to generalize these findings. The most random sampling found to be done (Schott, 1995) involved sending 126 questionnaires to a randomly selected sample of those with personal listings in a non-sexual cross-dressing publication.

In some other studies, samples of adults (mothers and fathers) have been effectively used to study parenting differences between men and women and the contrasts in the socialization of boys and girls (Brenes, Eisenberg, & Helmstadter, 1985; Emihovich, Gaier, & Cronin, 1984; Marantz & Coates, 1991; Reis & Gold, 1977.) In such studies, samples are non-randomly gathered from grade schools, pre-schools, or clinical referral. Similarly, in some other studies, adults were observed and assessed to statistically demonstrate hypothesized differences in the ways parents relate to their children, which may have been dependent upon either the gender of the parent and/or the gender of the child (Idle, Wood, & Desmarais, 1993; Kronsberg, Schmaling, & Fagot, 1985; Langlois & Downs, 1980; Lytton & Romney, 1991; Roopnarine, 1986.) The use of adults and children as samples in these studies is effective, but

generalization of the findings can only be applied to the population from which they were sampled.

As in all research, the sampling of populations is critical to the generalizability of the findings. As a whole, the body of research on gender identity development does not yet provide samples of general populations which would validate and support broad generalizations The body of literature has shown growth in this area as clearer definitions are being applied to populations. As previously discussed, clearly defined standards of gender identity and related problems are still limited, however strides are noticed as research of 12 to 20 years ago is compared to more recent work. Recent work (Marantz & Coates, 1991; Zucker, Bradley, & Sullivan, 1996) shows more carefully defined parameters using GID criteria whereas earlier work (Bates & Bentler, 1973; Reis & Gold, 1977) was much more relaxed or general in the description of gender dysphoria.

Challenging future research in gender identity related to the sampling and population aspect is the notion of whether or not GID should really be considered a disorder. It is argued that since it seems to be a strong precursor to adult male homosexuality, which is no longer considered a disorder according to the DSM, maybe it is just another variant among what should be considered "normal." The DSM-IV (American Psychiatric Association, 1994) provides the most current description and the most widely accepted standard by which gender anomalies are defined, and there is considerable debate and controversy over the specific criteria of GID (Pauly, 1992.)

In the extreme, there are some who would argue that cross-gender behavior in boys is really merely normal pre-homosexual behavior and serves to attract masculine love and attention (Isay,1989 cited in Zucker et al., 1992).

However, in contrast to this idea, GID rarely stands alone as a disorder, usually occurring in the context of other psychopathology (Marantz and Coates, 1991). In other words, if cross-gender behaviors were part of normal development, the isolated characteristics of GID would be seen in a population of otherwise healthy children as well, when in fact they are not.

Procedures

In experimental research with human subjects, the attempt to manipulate variables and put people through tasks and situations to observe what happens can be very complicated with ethical and procedural difficulties. When core personality and identity constructs are being studied, like much psychological research, "true experimentation" is not ethically feasible. In this case, male infants and little boys cannot be artificially subjected to potentially harmful or damaging situations to see how their gender identity development is affected. Instead the researcher must decide what he or she believes to be an effective way of applying measuring instruments, statistically controlling variables, and using samples to observe how naturally occurring differences are related to gender identity development. The main objective is to control for extraneous variables as much as possible.

A commonly found procedure in this body of literature is the use of matched controls. Once a study sample has been established, i.e. effeminate or GID boys, or male homosexuals, an additional group of boys or men is then selected to match the proband group on variables such as age, ethnicity, SES, religion, siblings, family characteristics, etc. depending on the research question. The hope is to eliminate the factors that are likely to confound the variables in question and to better isolate the ones of interest. For example, Marantz and Coates (1991) sampled a group of 16 GID boys and then carefully created a

comparison group of boys matching for the boys' ages, the families' SES, race, religion, fathers' availability before the son was age four, and the age of the mother. Such a design effectively eliminated the likelihood of the matched variables as being possibilities in explaining differences between groups, which in this case was to compare the mothers of the two groups of boys.

When studying children, observation in natural settings is common. Both preschool playrooms and specially equipped laboratory playrooms have been used in studies of children's choice of stereotypically gendered toys. In some studies the parents were present (Idle, Wood, & Desmarais, 1993; Langlois & Downs, 1980; Roopnarine, 1986) in order to observe parental socialization in terms of gendered toy play. Parents were not present (Weinraub, et al., 1984; Fagot, Leinbach, & Hagan, 1986) when the researchers were attempting to interpret a child's behavior as reflective of an inner sense of gender identity. In the above studies, the observations were all videotaped and then scored, using different raters. Some of the raters were blind to the purpose of the study (Fagot, Leinbach, & Hagan, 1986; Langlois & Downs, 1980) which effectively reduced the possibility of the researchers' bias towards attaining a certain end result. Interrater reliabilities were calculated and provided in all of the studies and were found to be mostly in the 0.80 to 0.95 range of agreement which is moderately high and certainly sufficient to support final results.

Research in gender identity is bound to be more of a challenge in procedural areas, partly because of the climate of "political correctness." The overlap with the research on homosexuality may impact the bias of research to an even greater degree. Looking at environmental and developmental issues related to homosexuality is not considered favorable as some would like to establish sexual orientation as a genetically determined

characteristic, just as is one's skin color and gender. In this climate, research (procedures and results) may be threatening because assumptions are made about people and certain populations. This is especially difficult working with the sensitivity about sexual orientation as well as gender stereotypes.

Statistics

This body of research primarily provides statistical information describing aspects of gender identity at several levels. A key observation is that almost all of the pieces of research provide descriptive statistics. Means and quantitative accounts of the samples are typically provided along with some percentages of populations. Little is known of the actual percentage of the total population of children who fit the GID criteria. It was reported in a recent study, however, that more boys are referred for GID than girls at a rate of 6.6 to 1 (Zucker, Bradley, & Sanikhani, 1997.) This study not only effectively described the disparity in the referral rates but also provided some possible hypotheses for further research.

Preliminary research done in preparation for a larger study often provides needed descriptive statistics. For example, by statistically measuring adult responses or judgements towards types of play and toys, some studies have done some important work to establish some categories for masculine and feminine stereotypes (Bates & Bentler, 1973; Brenes, Eisenberg, & Helmstadter, 1985; Langlois & Downs, 1980). At this point, this body of literature has generally proceeded beyond mere descriptions. Such descriptive information provides a base and a springboard for further research aiming to make deeper associations and inferences.

A common association already discussed is between boys who are gender dysphoric and adult male homosexuals. Green's extensive study on effeminate

boys and the development of homosexuality (1987) found that 68% of GID boys later grew up to be homosexual, thus establishing a strong association between problems with gender identity and later sexual orientation. Another simple, but strong study (Zucker, Bradley, & Sullivan, 1996) found an association between separation anxiety and boys with GID, stating that as many as 64.4% of GID boys show traits of separation anxiety. While such statistical information provides a deeper look into the picture of gender identity, one must be careful of the common assumptions made. It cannot be said from this information that separation anxiety causes gender problems or that gender dysphoria causes homosexuality.

Providing even greater detail and sophistication for the picture are inferential statistics which are able to identify specific factors as possible determinants of gender identity. As a whole, this body of research has developed to a point of recognizing some strong correlations which connote causality, however such assumptions of direct cause still cannot be made in the absence of true experimentation. Depression and borderline traits in mothers (Marantz & Coates, 1991), distant or absent fathers (Stevenson & Black, 1988), or physical attractiveness (Zucker, Wild, Bradley, & Lowry, 1993), may be highly correlated to the femininity of a boy, but this is as much as can be said. Statistical analysis within gender identity research includes the use of chi square, analysis of variance (ANOVA), multiple analysis of variance (MANOVA), and meta-analysis of bodies of research on specific factors. In spite of the sophistication of the level of statistics used, true causal relationships cannot be determined and should not be assumed. Such is an inherent problem in human social and behavioral research, though not distinctly problematic for the study of gender identity.

Becoming Masculine

Looking now at the empirical research on male gender identity development, it will become evident that certain variables or factors are stressed as being important and strongly related to the engendering process. Maccoby and Jacklin (1974), in their extensive review on sex differences, emphasize as of utmost importance the social shaping in a child's acquisition of sex-typical behavior, at the same time recognizing this acquisition as related to sex-linked biological predisposition as well. In this light, the presentation of a valid description of the major processes involved in the development of masculinity within the male human being must be inclusive of both intrinsic and extrinsic factors.

Biological factors influence gender development in ways that cannot be ignored, therefore some key pieces of biological research will be noted. Given the scope of this paper, however, the emphasis of discussion will be on aspects of male gender development that appear related to postnatal and external influences including familial, social, and individual distinctive factors. As this paper is written in the interest of psychological, emotional and human relational processes, the search for and review of empirical studies has focused on these areas.

Biology

Studies of hormonal and genetic influences on gender identity and sexuality have become better known in the recent decades as the pursuit to demonstrate a biological basis for homosexuality has become more popular. (Bailey, Willerman, & Parks, 1991; Ehrhardt and Meyer-Bahlburg, 1981; Meyer-Bahlburg, et al., 1995; Money, 1988) Biological studies are interested in what is physiologically present at the time of birth (a function of pre-

environmental exposure) which contributes to or brings about the eventual manifestation of gender. This would include genetic determinants and prenatal hormonal influences.

The genetic code for each person is established at the time of conception and human characteristics which are determined by the genetic code are considered immutable. On the other hand, prenatal hormonal influence is a biological influence which technically can be altered or affected. Sex hormones, starting at about the second month of gestation, influence the male/female dimorphism of the developing brain and genitalia in four possible ways; masculinization, feminization, demasculinization, or defeminization (Money, 1988). Hormonization is generally considered a natural, normally uninterrupted influence occurring beyond the control of the developing fetus or the mother.

Twin studies are classically used in a great deal of behavioral research and attempt determine the extent to which genetic factors are involved in establishing human personality. By studying groups of monozygotic (MZ) twins, which share 100% of their genes, and dizygotic (DZ) twins which share 50% of their genes on average, the assumption is that MZ twins will be significantly more similar than DZ twins in traits that are genetic, given the twins share the same environment.

Mitchell, Baker and Jacklin (1989) attempted to demonstrate that MZ twins are much more similar to each other in their masculinity or femininity than same-sex DZ twins. They estimated that between 20% and 48% of masculine or feminine personality traits may be attributed to genetic factors. These results were established from, and rely upon the validity of, two paper and pencil tests given to pre- and early adolescents and can only be generalized to such. Results like this are helpful but followed up must be done before more is known about

the full scope of the development of masculine and feminine personality traites over a lifetime.

In a similar pursuit, Rowe (1982) found that similarities in masculine personality traits were significantly higher between MZ twins (r = .52) than between DZ twins (r = .18), suggesting a genetic component.. The results were carefully scrutinized and compared to statistics which describe typical similarities and differences between MZ and DZ twins as expected by shared environment and/or genetics. This work provides resonably sound evidence for the hypothesis that certain masculine (instrumentalality) traites, as measured by the tests administered, do have a genetic component. To what degree such traites are inherited, the author does not speculate.

Hypotheses regarding prenatal hormonal influences upon sexual and gender identity stem from animal research and later from interest in research on the etiology of homosexuality. In animal studies, the fetuses of pregnant rats, guinea pigs, sheep, swine, and primates have been artificially exposed to sexualizing hormones (Money, 1988). Other experiments (as cited in Money, 1988, and Bailey, Willerman, & Parks, 1991) have involved exposing pregnant rats to stressful situations in order to induce a "naturalistic" hormonal release response. These types of experiments have sought to measure the possible hormonal impact (however it is imposed) on fetal development. Results have often demonstrated cross-sex behavior and maldeveloped genitalia.

Since this kind of experimentation should never be done on humans, retrospective reports of adult homosexuals and their mothers have been depended upon and utilized to look for evidence of naturally occuring stressful situations or other factors that may have influenced prenatal hormonization. In such an attempt, Bailey, Willerman, and Parks (1991) failed to reveal a

maternal, prenatal stress factor which may have accounted for childhood gender nonconformity or for an adult homosexual, or bisexual orientation. Mothers of effeminate children were reported to be more stress-prone, however, which may, in fact, support findings for post-natal influences to be discussed later.

Stoller (1985) writes that, with few exceptions where biological forces may at times play a significant role, "...gender role is determined by postnatal psychological forces, regardless of the anatomy and physiology of the external genitalia" (p. 48). Likewise, Money (1988), a predominant writer and researcher in the medical aspects of sexuality, holds that human sexuality and gender develop as a result of the interplay of biological and sociological factors. Prenatal and postnatal determinants are not mutually exclusive. He writes in reference to sexual orientation and gender identity that "...there is no human evidence that prenatal hormonization alone, independently of postnatal history, inexorably preordains either orientation." (p.72).

Phases of Development

Truly, gender distinction begins at conception and continues throughout a person's life in some form or another. While biological determinants are the first to influence gender and later gender identity, it is not until after birth that a human being begins to distinguish him or herself as a gendered person. In most characteristics of human personality and physical capabilities, there are critical or sensitive periods at which normal development takes place. When such moments have passed, there is often a question of whether the trait will develop normally or at all. Money and Ehrhardt (1972) describe such a critical period in gender identity to be sometime between the ages of 18 and 36 months. This is in agreement with most all theorists and researchers on this topic. Nicolosi (1991) writes that within this time period, the second half of the second year

(18-24 months) appears to be the time of greatest receptivity to the acquisition of male gender identification.

From the moment of birth, a new aspect of gender differentiation begins to occur. At this point a child is named by the outside world as a boy or a girl. Stoller (1984) writes, "Gender identity starts with the knowledge and awareness, whether conscious or unconscious, that one belongs to one sex and not the other" (p. 10). The parents initiate the socialization of this self knowledge and awareness within the boy or girl as they respond to what has already been established genetically and anatomically. The name that is given, the types of clothing that are put on, the toys that are provided, the behavioral responses to the child, etc. begin the socialization process which corresponds with the biological substrates and further developing cognitive and psychological capacities.

Coates and Wolfe (1995) write that cognitive-developmental researchers have observed that a child has the ability to discriminate male and female voices as early as two months. By nine months categorical distinctions can be made between male and female faces (Fagot & Leinbach, 1993). Verbal labels for men and women are expressed by age two years, and by two and a half years, children are able to verbally identify themselves and their peers as boys or girls. "It appears that the binomial distinction between [male and female] may be the second categorization achieved by the child, preceded only by the distinction of big and small.... No sooner is this capacity achieved than it becomes affectively significant for the child" (Coates & Wolfe, 1995, p. 18).

Children are first able to distinguish between male and female categories, identifying men, women, boys and girls and can identify themselves as one or the other. This takes place around two years of age. Soon after, children are

able to make distinctions in gender characteristics and stereotypes. These abilities are quickly, and possibly simultaneously, applied within social interactions and relationships. Research on young children, although challenging, serves to support and clarify these assumptions. Several excellent studies conducted on very young children have shed light on specific developmental tasks for gender identity.

A gender-labeling task was presented to toddlers between the ages of 21 and 40 months (Fagot, Leinbach , & Hagan, 1986). The task required them to discriminate between pictures of boys and girls. After the task was first administered, the toddlers were observed for four 15 minute time periods over 2 weeks during which several sex-typed behaviors were assessed. Toddlers (mean age 30 months) who "passed" the gender-labeling task spent more time playing with same-sex peers than did the toddlers (mean age 26 months) who "failed" the task. The findings showed that the ability to correctly label the gender of others corresponded to the timing when children began to play with others of the same sex and to the timing when aggressive behavior was seen in boys significantly more than it was seen in girls.

Another extensive child study demonstrated that, normally, at the beginning of the second year of life until the third year, significant developmental growth seems to take place in tasks related to gender identity (Weinraub et al., 1984). As early as 26 months, nonverbal and verbal gender labeling was observed in a significant number of children. Compared with older children, 31 and 36 months, a significant increase was noted in nonverbal gender labeling skills. Verbal identification of self gender was observed in a significant number of children at 26 months and a significant increase in the rate of nonverbal ability was observed in children at 31 months. As early as 26 months,

children displayed preferences for toys stereotypical for their sex. This seems to be an interesting finding as sex-type toy preferences were noticed before children can demonstrate the ability to recognize other stereotypical gender roles and characteristics.

According to cognitive developmental theory, a child who is able to correctly distinguish between boys and girls, men and women and correctly identify his or her own sex, without wavering, has demonstrated the basic achievement of gender identity. This capacity is the first level in the process of developing a secure and stable knowledge of sex as a permanent physiological attribute, that is, gender constancy (Maccoby & Jacklin, 1974). After approximately 36 months, gender identity is fairly stable and congealed as a personal construct out of which a child lives and responds in relationship to others. Given that they are healthy and intact, internal gender schemata and stereotypes provide the basis from which boys and girls continue to develop into their identities as men and women.

Paternal Factors

The role of the father in the development of a boy is an area of study that has drawn a considerable amount of attention (Adams, Milner and Schrepf, 1984; Lamb, 1976). Psychological research in the middle of this century focused on the effects of war and the absence or loss of fathers on families. More recently, however, the interest is more focused on paternal absence due to divorce or separation. Much of the reason for such interest is because of theory which has emphasized the importance of the father in the various aspects of identity and role development in male offspring (Stevenson and Black, 1988). Both social learning and modeling theories emphasize the importance of the father's (or significant male figure's) role in the process of engendering a boy.

There is little doubt that boys behave distinctly differently from girls. Observations across cultures show that boys engage in more play with physical contact. There is also less emphasis on verbal skills as compared with girls. The universality of these phenomena and the early demonstrations of them in children support the physio-chemical basis for initial differentiation. Nicolosi (1991) believes that the energetic activity of little boys naturally draws the attention of the father. It is the father and other males who will more often engage in rough-and-tumble play than do the mothers or other females. Dad has a particular appeal that draws the father and son together. There is a masculine energy and physical bond that the boy finds exciting. Friedman (1988), talks about the interaction between father and son as one that involves a great deal of physical interaction and rough-and-tumble play. One of the specific hallmarks of GID is the lack of interest in such activity. Aspects or personality features related to the boy and his lack of desire for rough-and-tumble play will be discussed in more detail later.

A father may feel the need, respective to his gender, to be responsible for the sex-typed behavior of his son. An important aspect of the father's involvement is in his ability to enter into a boy's life from an external vantage point and have an impact upon him. A two part study focused on parents and peers as socialization agents in children's toy play (Langlois & Downs, 1980). Fathers were observed to demonstrate strong patterns that were not only different from mothers but also different depending on the sex of the child. The fathers were actually more negative towards their sons than toward their daughters when their children engaged in cross-sex toy play, possibly reflecting more rigid expectations for sons than for their daughters.. Fathers exhibit differential treatment of sex-typed play behaviors between sons and daughters

and they socialize them in different ways.

Using 48 preschool children, ages 3 and 5, Langlois and Downs (1980) measured how fathers, mothers and peers each affected the sex-typed play in which boys and girls chose to engage. An especially pronounced finding was that fathers rewarded their sons for playing with toys that are traditionally sex-typed for boys. The kinds of rewards that were most prevalent (significant at $p < .05$) for same sex versus cross sex play were behavioral helping, smiles, praise, verbal agreement and joining play. Three-year-old boys were rewarded by their fathers more than five-year-olds ($p < .0001$), and girls were rewarded by their fathers more than were the boys ($p < .0001$.) As well, fathers tended to discourage or punish sons more than daughters for cross sex toy play by behavioral ridicule or interference and negative talk. Five-year-olds were also punished more than three-year-olds ($p < .01$.) The authors believe these findings show evidence of the importance of the father's role in the socialization of traditionally sex-typed behaviors; perhaps more so than the mother's. This research provides strong support for gender differences in socialization activities.

Fathers tend to be highly influential on their son's sex-role beliefs. Such beliefs are an integral part of gender behavior and socialization. Perceptions about behavior being particularly masculine or feminine will influence choices of behavior in which people engage and shape the perception of their own identity. Emihovich, Gaier and Cronin (1984) compared groups of fathers with more and less traditional sex-role beliefs with the sex-role beliefs of their sons. Fathers who had less stereotypical expectations had sons who shared similar beliefs. Likewise, fathers who had more traditional, stereotypical expectations also had sons who shared similar beliefs.

Observing now that fathers have an important and unique role in the lives of their sons, it can be seen that the father's absence is likely to have a great impact upon the gender identity development within a boy. While this is demonstrated in a number of pieces of literature to be discussed, an extensive review and meta-analysis of the literature on paternal absence and sex role development (Stevenson & Black, 1988), found little difference between father-present and father-absent boys' sex-role development. In the analysis of 66 studies, Stevenson and Black found a significant, although small, difference indicating that father present boys were more stereotypically sex-typed than father absent boys. In contrast, no such difference was found for girls, suggesting the presence of a qualitative difference in what sons need from their fathers more so than do daughters. This study provides valuable discussion on the matter of father absence, however, it is too extensive to fully address within the scope of this paper.

A study by Kagel and Schilling (1985), surprisingly not included in the above analysis, attempted to measure the effects of father absence and feminine sexual identification. Two aspects of identity, sexual and gender were measured. The authors defined gender identity as a conscious, overt process related to the way that a person experiences himself as demonstrated through behaviors, interests, preferences and sexual orientation. Sexual identity was defined as more of a largely covert or unconscious process of wishing to be like members of one sex or the other. Such definitions are not found elsewhere, however, the terms were clearly distinguished.

Kagel and Schilling (1985) used a sample of 250 students taken from a college population. Groups of 100 females and 100 father-present males were tested in order to establish the initial discriminant functions of the measures. A

sample of 50 father-absent (FA) males was then compared to a sub-sample of 50 father-present (FP) males randomly selected from the initial sample of 100 father-present males. This procedure not only effectively provided a quantitative measure comparing masculine identification among two male samples but also established a measure of possible qualitative similarities or differences with a female sample.

No significant differences were found between the FP and the FA males on sexual identification. However, substantial support was found for a positive association between father absence and less masculine gender identity. FA subjects were found to score in a less masculine direction on the gender identity measures than FP subjects, [$F(1, 98) = 3.92, p < .05$]. Even though the absence of father among the male subjects does not appear to be associated with a qualitative pattern of feminine gender identity as found in female subjects, there is the suggestion that father absence is associated with less masculine gender identity than is father presence. This is found to be consistent with the writings of Lamb (1981) who suggested that the father may serve as a mentor, guide and model to teach his son necessary skills to negotiate interactions with the environment.

Further exploration was made into the association of father absence and sexual identification when the mother's marital status of the FA group was examined. Subjects whose mothers did not remarry or cohabitate after the father's enduring absence, had a greater likelihood of feminine sexual identification than subjects whose mothers did either remarry or cohabitate. If the absent father was replaced in the home, it appears that feminine sexual identification for the subject was markedly reduced. The authors concluded that father absence may increase the likelihood of feminine sexual identification

because of the absence of a male parent figure as an object of, or model for identification.

Further examination of the quality of father-son relationships demonstrated that, among FP males, there was a significant association for masculine sexual identification and positive father-son relationship. However, no such relationship was found in FA males. The presence and availability of the father may be more strongly associated with masculine gender identity than the quality of the father-son relationship.

In his writings on male homosexuality, Nicolosi (1991) reiterates the importance of the father in male gender identity development, identifying this to be a primary and significant factor in later sexual orientation. He states that, as there is a primary relationship with the mother, a boy, unlike a girl, has an additional developmental task of making a shift away from his mother toward his father who will provide the way for a masculine identification (p.26.) While the relationship with the father provides a model and mirror for masculine engendering which potentially will extend well into adulthood, the critical period within the first three years of a boy's life is very important in terms of forming a very necessary paternal bond. Nicolosi further states, in accord with Elizabeth Moberly (1983), that such a detachment from, or the lack of, a fathers presence leaves a void of a legitimate same-sex need. In puberty, this need can be eroticized and manifests itself in home-erotic desires.

Further supporting this idea of the father's role in the socialization process of gender is a study conducted in Finland (Huttunen, 1992). With a sample of 113 12-year-old boys and their fathers, Huttunen measured the gender role identities of the participants by using a modified version of the *Bem Sex Role Inventory* (BSRI) (Bem, 1974). This self-report inventory consists of two

subscales measuring gender role identification; one measuring masculine and the other feminine. There are, however, four categories to which the subjects can be assigned: *masculine* (high masculine traits), *feminine* (high feminine traits), *androgynous* (high in both masculine and feminine traits), and *undifferentiated* (low in both masculine and feminine traits). This study was done to investigate the similarities between the gender role identities of boys and their fathers. Huttunen also attempted to determine the possible influence of the father-son interaction on the specific nature of the similarities by including results from a structured interview, focusing on aspects such as time spent together and the warmth of their connection.

The results indicated that fathers who had scored high in masculine attributes had sons who had done so as well. Yet where fathers had rated themselves more feminine, the son had done less so in the same direction. In fact, where sons had rated themselves high within the feminine scale, there was no significant correlation found with the father's gender role as being either masculine or feminine. As expected, the factors related to the time spent together and the availability of the father had an impact on the relationship between the masculinity of the father and son. The strongest correlation (0.45, $p < .01$) occurred where it was indicated that the father and son spent a lot of time together. Interestingly, a slightly negative association was manifested between the femininity of the father and that of the son.

From this particular study, it cannot be known to what degree the findings may be different from culture to culture. A modified version of the BSRI was used which was adjusted to Finnish sex role stereotypes. While this was done to make the study relevant to the population studied, it makes it difficult to make comparisons to other populations as non-standard instruments

were used.

A predominant finding in a study related to paternal availability (Green, Williams & Goodman, 1985) was that fathers of "feminine" boys seem to have spent less time with their sons as compared to a contrast-group of "masculine" boys. This study was done by establishing a sample of 66 boys ages 4 to 11 who preferred the clothes, toys and companionship of girls, preferentially role-played as females and stated their wish to be girls. Categorically, their behaviors were found to be consistent with GID. The contrast-group of 56 boys was selected to fit demographic traits of the first group. The groups were matched for age and sibling sequence of the boy and the racial, religious, educational and marital status of the parents.

Results showed that fathers of the feminine boys reported spending less time with their sons in the first year as compared to the fathers of the non-feminine boys. Fathers of the "feminine" boys also reported spending significantly less time with their sons in the second years as well as third through fifth years. These fathers reported spending more time with the brothers of their "feminine" sons and were found to be less likely to be living with their families by the son's fifth birthday.

Fathers play an active role in the socialization and engendering of their sons. In a related manor, fathers also passively contribute as their presence provides a model by which a boy can conform his own behaviors. Hockenberry and Billingham (1987) found that while traditionally feminine or cross-sexed traits and behaviors indicate the likelihood of a later homosexual orientation, a more powerful predictor was noted to be the absence of masculine behaviors. Campbell (1989) writes that people will imitate those most similar to them. As boys identify with their fathers, they want to be and act like them. Some aspects

of modeling will be discussed as parental contrasts are examined.

Maternal Factors

Within western culture, a boy's exceptional attachment to his mother has historically been equated with weakness or soft qualities within the boy. The relationship of mother and son has considerable notoriety among the many developmental hypotheses about boyhood gender deficits. In this same vein, the presence of a powerful, over-protective or over-involved mother who discourages separation and individuation is a major component of classic theory regarding the etiology of homosexuality. Mothers, then, are likely to have significant impact upon the gender identity development of their sons.

No one can deny the great importance the mother does have in a boy's life and the role she has in his development, however when there seems to be an inordinate preoccupation and involvement between mother and son, western society tends to frown upon this, making social critique against such closeness or dependency. The derogatory term "mama's boy", which makes reference towards weakness, dependence and effeminate qualities, seems to reflect support of the classic notion that qualities of a mother's interaction with her son may be related to the boy's gender identity development. Stoller (1985) simply states the hypothesis that, in the absence of special biological circumstances, "...the more mother and the less father, the more femininity"(p. 25).

Marantz and Coates (1991) focused a study on mothers of boys with diagnosed GID. They found that significantly more mothers of boys with GID had a diagnosis of borderline personality disorder as measured by the Diagnostic Interview for Borderlines (Gunderson, Kolb, & Austin, 1981) than did mothers of boys without GID. While 25% (four) of the proband mothers were diagnosed as borderline, none of the control group mothers were. Further, 46% of

proband mothers' scores versus 6% of control group mothers' scores on the Beck Depression Inventory fell within the clinical range. Combining these two measures, 53% of mothers with sons with GID met the criteria for the clinical diagnosis of borderline personality disorder, or had symptoms of depression compared to only 6% of the mothers from the control group.

An additional portion of the Marantz and Coates study was their measure of symbiosis between mother and son. Five dimensions of symbiosis were measured using the Interview for the Measurement of Symbiosis. This test provides scores for specific dimensions of dependency, separation difficulty, undifferentiation, intrusive control, and disapproval of other relationships. The interview segments were then rated by assistants who were blind to the purposes of the study and to the groups. There was a strong inter-rater reliability for each of the five dimensions, ranging from 0.96 to 0.98. The results showed that the mothers of boys with GID reported significantly more symbiotic attitudes and behavior than the controls in their sum total scores across all five dimensions. The authors wrote that these findings suggest mothers of boys with GID exhibit child-rearing attitudes and behavior that promote symbiosis and interfere with the development of autonomy. These mothers show extreme dependency on their sons for emotional sustenance and use intrusive measures when setting limits and disapprove of their sons' relationships with others.

The results of this study are statistically powerful and the findings indicate the strong probability of a real difference between mothers of boys with and without GID. Findings such as this are sufficiently strong to support further study of the relationship of maternal psychopathology and the presence of gender disturbance in the sons of such mothers. The authors suggest that a more comprehensive study would include the evaluation of both fathers and mothers

as well as a broader spectrum of measures. Such study is likely to shed more light on the familial contribution to this disorder as well as provide insight for treatment strategies as well as guidelines for therapeutic and preventive interventions.

In contrast to the findings of pathological over-involvement, other writings as well as research such as Marantz and Coates (1991) suggest that maternal deprivation may also be linked to developmental problems in gender identity for boys. Maternal absence may be due to either depression or emotional unavailability. Stoller (1984), in two case study descriptions, write mothers who had a profound inner sense of emptiness and incompleteness (p.96). Combining this with a little boy's sensitive disposition (which will be discussed later in more detail), Coates and Wolf (1995) write that this may contribute to his becoming like or imitating mom in order to replace the lack of a legitimately needed mother. Being Mommy becomes a substitute for having Mommy.

Another factor that has been implicated for contributing to GID is the suggestion of the mother's preference for a girl (Zucker, et al, 1994). Such a suggestion has come out of the research of Blanchard, Zucker, Bradley and Hume (1995) which demonstrated a significant difference in the ratio of male and female siblings among homosexual male adolescents and effeminate boys as a group as compared to what would be expected by the national average. Their results confirmed similar ones from previous studies which have shown that male homosexuals have a greater than expected proportion of male siblings and that they have a later birth order. Given this information, the questions arise as to what other factors might be related to this phenomenon.

Hypothetically, one might consider that a mother is more likely to

express the desire for a daughter if she already has given birth to one or more sons. A study by Zucker et al. (1994) sought to explore such an idea. Such information, they believe, may give credence to and provide support for the study of another, older hypothesis: could the way that a mother interacts with a later-born son that was desired to be a girl be different to the extent that could possibly be related to the way a son would develop in his gender identity? To test their initial hypothesis, mothers of a population of 66 boys in Los Angeles, who had shown patterns of cross gender behavior consistent with GID, were asked about their recalled prenatal gender preferences. In comparison to a demographically matched control group, no significant difference was found and for both groups a maternal wish for a girl was more common in the sibship category in which all of the proband's older siblings were male.

In the same study (Zucker, et al., 1994), a second population from Toronto was also assessed. From a population of 150 boys referred to and assessed at a clinic specializing in gender identity problems, a sample of 103 had met same criteria that was used to determine cross-gendered behavior in the group in Los Angeles. In the Toronto group, 43.7% of the mothers indicated a preference for a girl which was significantly greater than the 26.9% of mothers in Los Angeles. Given the absence of a control group in Toronto however, it cannot be determined whether the wish for a girl in that specific sample was disproportionately high.

The research up to this point has not been conclusive enough to determine whether or not cross-gendered behavior boys tend to have mothers who desired them to be girls. The researchers concede to several shortcomings that may have influenced the findings and that further research may be designed to avoid. Asking women of markedly feminine boys about their prenatal gender

preference may express rather explicit and obvious bearing on putative etiology, suggesting that her cognitive desire somehow impinged upon the child's obvious gender disturbance. Overt expression of the wish for a girl would therefore be undesirable. A stronger research design would be to collect data on prenatal gender preferences pre-birth and then later assess the off-spring for relation to individual differences in sex-typed behavior.

Constitutional Factors

Gender identity and gender role are interrelated as a boy's inner sense of masculinity is often manifested through outwardly visible behaviors, mannerisms and interests. In addition, one's physical capacities and appearance as male or female act as other components to the entity of ones' gender. People make judgements about themselves and about others which are based upon these outward, sex-typed manifestations. There is evidence which shows that the presence of certain constitutional factors within boys have been correlated with the presence of gender identity problems and/or later homosexual orientation. Such characteristics mentioned in this section are part of a boy's inborn, biological constitution which seem to effect the way people interact with him after he is born.

It was Stoller (1984) who first noted that, as a population, the boys with whom he worked seemed to be very attractive. He suggested that among the factors related to extreme femininity is a special beauty in the boy, saying that physical attractiveness seemed to serve as a type of stimulus which possibly facilitated parental feminization, particularly on the mother's part. Since this first observation, several studies have confirmed that there is a significantly high correlation between physical attractiveness and boyhood femininity. Green (1987), in a smaller portion of an extensive systematic work on effeminate boys

and the development of homosexuality, had two groups of parents describe the faces of their infant sons. The raters of the interviews and questionnaires were blind to which group the descriptions belonged. Findings showed that the parents of feminine boys would more often use descriptors such as "beautiful" and "feminine" and would receive comments such as "He would make a beautiful girl" than parents of the control boys. This information has been used in further studies.

In a more recent, extensive study (Zucker, Wild, Bradley, & Lowry, 1993), standardized photographs of 34 boys were shown to a group of 36 men and women who were asked to rate (on a 5-point scale) each photo on five descriptive traits; attractive, beautiful, cute, handsome, and pretty. The photographs included 17 GID boys and 17 controls, which were matched for age, IQ, SES, and other clinical diagnoses as measured by a child behavior checklist. The raters were blind to which boys were in which group. They found that on all five adjectives, boys with GID were judged to be more attractive than the control boys. This study has provided strong evidence for, and very interesting descriptions of, what appears to be a real relationship. The authors correctly do not make presumptions about the relationship, but they acknowledge that it is important that further work be done to possibly determine why such a relationship is present.

Beside the natural, biological factors contributing to physical attractiveness, the response of others towards such a boy is likely to be the more direct connection to the gendering process. Green (1987) presents clinical evidence suggesting that the parents of some feminine boys, particularly the mother, style the hair of and dress boys in such a way that might be construed as cute, unmasculine or even feminine. It is also noticed that later the boys

themselves shape their appearance to create a softer, cuter look, implicating the sociological effect as the boys have learned how to draw attention to themselves that may either be encouraged or not necessarily discouraged. It may also be simply a symptom of the already underlying cross-gender identification.

In a study of a group of families with GID boys compared with a control group of families, the beauty of the child was found to be a significantly different factor between the groups, a finding which coincides with the research just discussed (Roberts, Green , Williams, & Goodman, 1987). In addition, this study found one other factor related to a boy's constitution. The incidence of childhood illness was found to be greater among the GID boys than the control boys. This description does not provide a basis as to the cause of such a relationship, however, the authors hypothesize that illnesses or physical disabilities might predispose the parents, particularly the father, not to involve their sons in rough-and-tumble activities. Further, illness may also limit the child's ability or opportunity to be involved in contact with other male peers. More research needs to be done to explore such hypotheses.

Connected to the avoidance of rough-and-tumble play, hence the avoidance of important male contact in a young boy, is the possible relationship to extreme sensitivity. Friedman (1988) writes that such aversion to physical contact may predispose a boy to psycho-social interactions which, over a lengthy portion of childhood may have and impact upon and be influenced by gender identity differentiation and the quality of relations with others. Studies on inhibition and sensory reactivity within GID boys are currently being done and at the writing of this paper were not yet completed or published. Coates and Wolf (1995) demonstrated in some promising pilot work that approximately 50% to 75% of boys with GID showed a high rate of sensory reactivity. While

more has yet to be done in this area, high rates of sensitivity involving increased capacity for sensory pleasure or pain, in areas of sight, sound, touch, and olfaction, may be strongly related to a boy's lack of desire and/or ability to engage in what is seen as normal boyhood activity; aggression, physical contact and rough play.

Familial and Social Dynamic Factors

Family Systems theory, psychoanalytic case study, and clinical observation have provided the primary basis of information regarding the possibility of family dynamics operating upon the process of gender identification. Money (1994) writes of a parent-child yoking effect that is played out when parental incompatibility threatens to sever the child's pair-bond with the parent who may depart. He writes that while the prevalence of this notion has yet to be truly ascertained, he anticipates that familial and social dynamics play a strong part in the development of a child's gender identity. The prevalence of his specific notion has yet to be ascertained through more systematic research, however, some research is available which addresses hypothesis related to family.

One recent study of the family dynamics of transvestites (Schott, 1995) found that, out of a sample of 85 cross-dressing males, there was a significantly higher percentage of subjects being the only child or the eldest child compared to a national sample. The respondents also generally reported having a much closer relationship with their mothers than with their fathers, however the same was shown for a control population. Statistics were not provided for between groups comparisons. In an open-ended question regarding their own belief about what contributed to their cross dressing behavior, the largest percentage (27%) attributed their behavior to family environment–the dominant role of the

mother and the remoteness of the father. Generalization of these findings is highly problematic because the exact relationship between transvestitism and gender identity is unknown. Also, the sample of the research population (men with personal adds in a national non-sexual cross dressing magazine) may be very different from the population of cross-dressers as a whole.

The presence of separation anxiety in boys, due to familial factors including parental psychopathology, marital discord and reactions to stressful life events, has been speculated to be a strong factor in the development of GID. Based upon observations and preliminary study and writings by Coates (1995), a more in-depth study was conducted to test this hypothesis (Zucker, Bradley, & Sullivan, 1996). Using a sample of 115 boys referred for gender identity problems, it was found that 64.4% also exhibited symptoms of separation anxiety. In further analysis it was also found that there was a six-fold increase in the child's chances of meeting the criterion for separation anxiety when there was a mother-only or reconstituted family versus a maritally intact family. The authors do not presume that one disposition causes the other but they do interpret the findings as indicative that family problems may very well be some of the underlying factors for such childhood disorders.

Peer socialization The presence of others greatly shapes the way that we live and learn to be in relationship. Apart from family, peer interaction alone can have a significant impact in shaping personal identity. One's perceptions of the thoughts, feelings and responses of another are highly valued and tell one about his or herself. In their study of sex-typed play with three and five year old children, Langlois and Downs (1980) found that same-sex peers were likely to use punishment (verbal interference, behavioral interference, ridicule, or intrusiveness) toward boys who played with toys that were stereotypically for

girls. As well, boys were actively rewarded (with praise, help, affection, imitation, sharing, and/or acceptance/reception of an object) by same-sex peers for playing with gender appropriate toys. These results, using MANOVA to compare the factors of mothers and peers, boys and girls, and same-sex toys and cross-sex toys, were significant at the $p < .05$ level. Such findings demonstrate the presence of social and peer pressure and encouragement to conform to certain standards or expectations for gender stereotypical behavior.

Poor peer relations have been commonly noted in boys with gender identity problems (Coates, 1990; Zucker, Bradley, & Sanikani, 1997). Zucker (1990) demonstrated a strong correlation between peer ostracism (being called a "sissy") and cross-gender identified boys. Theoretical suggestions have been made that either these children just have an inability to relate or that there is extreme prejudice in other boys who tease and shun the presence of boys who exhibit problems in their gender identity and/or behave in effeminate ways. In a longitudinal case study (Suttor, 1996), three boys who fit the diagnosis for GID attended a school where a policy protecting them from teasing was implemented by the school educational psychologist. It was her belief that, given the chance, boys could possibly grow out of their gender indecisiveness as long as support was provided and that there was no attempt to push them into conformity.

The case study describes how two of these boys attended the school in the same class and the other one was at a different grade level. All three of them were monitored from ages 10 to 20. Despite the severity of the gender dysphoria, the extreme wish to be a girl, and the cross-gendered behaviors, each of the boys were able to attend school in an accepting environment without the fear of being teased or bullied. Each of them was able to later adopt more gender appropriate behaviors and has shown evidence of healthy same-sex peer

relationships and heterosexual interests.

The author suggests from these cases that gender identity disorder is better viewed as a developmental lag which can be pathologized by intolerance and huge pressure to conform to a masculine stereotype. If children are accepted as they are, they may not need to maintain their gender dysphoria as an essential part of themselves. While these three boys held onto their's for a surprisingly long time, possibly owing to the fact that not all environments were controlled, they ultimately had no reason to hold onto it permanently. Such information is rich and can be very helpful in supporting and spurring new interest in attempting to do more methodological research on gender identity development.

Gender contrasts The referral rate for boys with GID has been consistently higher than it has been for girls. From 1978 through 1995, the Child and Adolescent Gender Identity Clinic in Toronto, Canada measured a ratio of 6.6 to 1, boys to girls (Zucker, Bradley, & Sanikani, 1997), which has been consistent with other researcher's observations. The prevalence of GID in children for the general population is not known, let alone the difference of prevalence between boys and girls. The authors suggest hypotheses related to societal factors that possibly contribute to this phenomenon other than a true difference in prevalence.

One suggestion, citing other research findings, is that there is less social tolerance of cross-gender behavior in boys than there is in girls. Feminine behavior in boys is reacted to more negatively than masculine behavior in girls. Further, more approval is given for girls' cross-gender behavior than boys. Such findings would support the higher likelihood for referral of gender problems in boys. If, in fact, a prevalence study were done, the authors hypothesize that it

would not detect sex differences as marked as their referral rates. It may be that there is a higher tolerance for cross-gendered behavior in girls which leads to fewer referrals.

As real as are the distinctions made in gender identity between boys and girls, distinctions are evident in the ways that men and women socialize their children to behave. It was found that mothers intervene more quickly than fathers when a child is involved in risky or annoying behaviors (Kronsberg, Schmaling, & Fagot, 1985). Parents also respond differently depending on the gender of the child. Girls tend to be trusted more as fewer interventions are made when they are involved in risky situations. Boys, however, will be allowed to be in such a situation longer as parents take longer to intervene. Langlois and Downs (1980) demonstrated that socialization pressure for sex-typed behaviors come more consistently from fathers than from mothers and that mothers generally use reward while fathers use both positive and negative responses in the reaction to their child's sex-typed behaviors.

Modeling theory and socialization theory will continue to hold a strong place in the research on gender identity development. Some progress has been made in looking at the distinctions in the gender of the parents as well as in the gender of the child when it comes to shaping the gender identity and related behaviors within boys and girls. Further, as social gender stereotypes change, modeling theory may be impacted as ideas about masculine and feminine role models change. Further research needs to be done to look at the contrast between boys and girls in the phases of differentiation. Stoller (1984) suggested that there may be considerable difference in the task of gender identification between boys and girls. He hypothesized that all children begin life with an innately feminine orientation. Boys have to dis-identify with their mothers to

develop a masculine identification (Coates & Wolfe, 1995).

From Boys to Men

Up to this point this paper has focused upon early development. As stated earlier, the first three years of life (according to the body of literature) is the most critical time in the acquisition of one's inner sense of one's gender identity. Research demonstrates the importance of these formative years for the a boy's acquisition of a secure inner sense of being a male. It has been demonstrated that becoming masculine is very much based upon first having an inner sense of being male. Acquiring masculinity and personal identification, however, is a process and an achievement that takes place over a long period of time.

A base of empirical literature on later stages of masculine identity development has yet to be created. In the past decade there has been a growing interest in considering the psychological issues of men as a distinct focus of study. The primary impetus for this has been from the growing realization that existing models (hypermasculine-macho or feminized-sensitive and gentle) of adult masculinity are limited (Gilbert, 1992). In this climate of discontent, confusion and loss of identification, what has become known as "the men's movement" has fostered an emergence of a variety of opportunities for male encounters. Groups, seminars, workshops, retreats, and gatherings, designed exclusively for men, seek to provide various ways for men to learn to integrate and balance psychological functions such as feeling, thinking and intuition within the context of being a man. Spirituality has also been a primary aspect of the men's movement as the largest gathering in United States history occurred October 4, 1997 in Washington DC as "Promise Keeper's" gathering of men

took place.

The ways that men have been recently making connections possibly demonstrates a hunger and need for further masculine affirmation. Dalbey (1988) writes that our culture has few rites of passage or rituals providing a symbolic structure to journey from one phase of life to another, specifically and particularly from boyhood into manhood, a phenomenon present in many other cultures. A formal ritual or rite of passage may provide a psychological reference point or critical moment for a man to establish a new plateau of understanding his masculinity and self identification as a male. Such rites or rituals provide male affirmation from the community of men and meets needs for affiliation–finding one's place as "one of the guys."

One small piece of research on rituals showed that cultures which were more sexually integrated, reducing the distance and distinctions between the sexes, were more likely to have male puberty rites than cultures with stronger divisions between gender roles (Kitahara, 1982). The author hypothesized that male puberty rites may serve to re-establish male and female distinction. With this in mind, it seems that within American culture, there continues to be a loss of gender distinction. As well, there are few formal rites of passage or rituals outside of religious or spiritual practices. Such issues are very open for new avenues of research and study.

Conclusions

Interests in gender differences are popular in society today as there are some who would like to see the distinctions downplayed, believing this will provide ultimate equality between the sexes. As gender identity research, in particular, is closely tied to research on homosexuality, issues of nature and

nurture seem to be come polarized factors. The issues become emotionally charged as certain agendas are promulgated and promoted. Scientific research should be neither propagandized nor sacrificed for the political or the religious agenda it may support or disfavor. Ideally, research could be done without the driving forces of such potential biases. However, it seems that, especially with this particular issue, certain agendas tend to be driving the research as opposed to quality research providing an objective base for human understanding. The research that becomes most popularized is that which supports "politically correct" ideas about gender and sexuality.

There must be a recognition of biological and environmental factors in gender identity development. While most of the body of empirical research and theoretical literature openly recognizes the interaction of nature and nurture, the findings which have the tendency to support one side or the other are the pieces which become popular and even sensational in the popular media. When a society wants simple answers to complex questions, the easiest thing to do is to provide simplistic explanations. While for so many health and personality traits it is acknowledged that genetic and environmental factors are both involved, issues of gender identity are strongly tied to some people's emotions and agendas. So much is politically, socially, and even morally determined regarding how we should think about and understand such things.

There is a good base of work in the area of gender identity research. Yet, there is a lot of room for continued study. As more is known about it, there emerges a more standard agreement in terms and measures which will lead to future support of or challenge to current findings. The concept of gender identity needs to be expanded to recognize a longer developmental process. It is one of the earliest identity constructs to develop and, certainly, one of the most deeply

established and enduring. However, there is a great open area for research which could possibly demonstrate that changes can occur in later life in regard to even gender identity. At this point, relatively little is known regarding an effective treatment for gender identity disorder

A gestalt approach is needed. Money (1988) says that postnatal programming is probably the most powerful and influential part of gender identity and that such influences become part of immutable biology. This type of thinking is in direct contrast to the usual way of thinking of how biology and environment work together. Research that can provide a fuller picture of the bio-psycho-social interaction of gender identity development should be welcomed. An integrated understanding will acknowledge genetic and environmental factors that work together and encourage recognition that the balance of such factors weigh differently for each and every person.

Finally, this author would even go so far as to say that there is a need to include a spiritual aspect in the concept of gender. Basic anthropology from a Judeo-Christian perspective holds that the complementary distinction of male and female demonstrates the image of God. This view holds that it was God who created humans as male and female, each with the capacity for both masculine and feminine attributes. Such a premise not only provides a fundamental basis for pursuing the understanding of gender development but also a motivation to enjoy and celebrate of the differences between men and women.

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